# INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(Not for submission under 37 CFR 1.99)

	Approved for use through 07/31/2012.
Application Number	10/593,173
Confirmation Number	8722
Filing Date	September 15, 2006
First Named Inventor	Tomotsugu MATSUI
Art Unit	3761
Examiner Name	Jacqueline F. Stephens
Attorney Docket Number	O119178

U.S. PATENTS						
Examiner Initials*	Cite No	Patent Number	Kind Code <sup>1</sup>	Issue Date	Name of Patentee or Applicant of cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
7J.S./	1.	5947943	Α	1999-09-07	Lee	

U.S. PATENT APPLICATION PUBLICATIONS							
Examiner Cite No Publication Number Kind Code Publication Date Applicant of Federate or Where Relevant Passag						Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	

	FOREIGN PATENT DOCUMENTS								
	aminer itials*	Cite No	Foreign Document Number <sup>3</sup>	Country Code <sup>2</sup>	Kind Code <sup>4</sup>	Publication Date	Name of Patentee or Applicant of cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T <sup>8</sup>
/,	J.S./	2.	01/41691	wo	A1	2001-06-14	Procter & Gamble Co.	/	/
		3.	1287799	EP	A2	2003-03-05	Uni-Charm Corporation		
		4.	0776645	EP	A1	1997-06-04	Uni-Charm Corporation	$\sim$	
		5.	01/94845	wo	A1	2001-12-20	SCA Hygiene Products AB		
/	J.S./	6.	00/76443	wo	A1	2000-12-21	Kimberly Clark Worldwide		/

	NON-PATENT LITERATURE DOCUMENTS				
Examiner Initials*	Cite No	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city, and/or country where published.	T <sup>8</sup>		
/J.S./	7.	EP Search Report dated June 21 2011 for EP05721031.2			

EXAMINER SIGNATURE				
Examiner Signature	/Jacqueline Stephens/	Date Considered	08/25/2011	

\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through a citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup> See Kin Codes of USPTO Patient Documents at www.USPTO.GOV or MFEP.901.04. 2 Either office in this issued the document, by the two-letter code (WIPO Standard at 785). 3 For Japones period focuments, the indication of the year of the region of the Empirer on the patient of the comment. 4 Kind of document at Kind of document at WiPO Standard ST 16 if possible. 5 Applicant is to place a check mark here if English language translation is attached.

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#### CERTIFICATION STATEMENT

Please see 37 CFR 1.97 and 1.98 to make the appropriate selection(s):

That each item of information contained in the information disclosure statement was first cited in any communication from a foreign patent office in a counterpart foreign application not more than three months prior to the filing of the information disclosure statement. See 37 CFR 1.97(e)(1).

#### OR

That no item of information contained in the information disclosure statement was cited in a communication from a foreign patent office in a counterpart foreign application, and, to the knowledge of the person signing the certification after making reasonable inquiry, no item of information contained in the information disclosure statement was known to any individual designated in 37 CFR 1.56(c) more than three months prior to the filling of the information disclosure statement. See 37 CFR 1.97(e)(2).

That each item of information contained in the Information Disclosure Statement filed concurrently herewith was first cited in any communication from a foreign patent office in a counterpart foreign application, and that the communication was not received by any individual designated in 37 C.F.R. § 1.56(c) more than thirty days prior to the filing of said Information Disclosure Statement. See 37 C.FR 1.704(d).

- ☑ Fee set forth in 37 CFR 1.17 (p) has been submitted herewith.
- The USPTO is directed and authorized to charge all required fees, except for the Issue Fee and the Publication Fee, to Deposit Account No. 19-4880. Please also credit any overpayments to said Deposit Account.
- □ None

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### SIGNATURE

A signature of the applicant or representative is required in accordance with CFR 1.33, 10.18. Please see CFR 1.4(d) for the form of the signature.

Signature	/Allison M. Tulino/	Date (YYYY-MM-DD)	2011-08-12
Name/Print	Allison M. Tulino	Registration Number	48,294

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